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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Sharon First name Denise Middle name Veazley Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Sharon Veazley Sharon Harper	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9843	

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Case number (if known)

Debtor 1 Sharon Denise Veazley

		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs. □ I have not used any business name or EINs.		☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	_	Business name(s)		
		EINs	_	EINs		
5.	Where you live			If Debtor 2 lives at a different address:		
		902 Dunlop Ave., Apt. 1 Forest Park, IL 60130				
		Number, Street, City, State & ZIP Code	-	Number, Street, City, State & ZIP Code		
		Cook				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.		If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	_	Number, P.O. Box, Street, City, State & ZIP Code		
ò.	Why you are choosing this district to file for	Check one:		Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		
			-			

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Case number (if known) Debtor 1 Sharon Denise Veazley

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Ch	napter 7					
		☐ Ch	napter 11					
		☐ Cr	napter 12					
		☐ Ch	napter 13					
8.	How you will pay the fee		about how yo	he entire fee when I file my petition. Please check with the clerk's office in your local court for more of you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or rur attorney is submitting your payment on your behalf, your attorney may pay with a credit card or checked address.				n, cashier's check, or money
				the fee in installments. If		e this option, sign	and attach the Applica	ation for Individuals to Pay
		The Filing Fee in Installments (O I request that my fee be waived but is not required to, waive your applies to your family size and you				o only if your inco y the fee in install	me is less than 150%	of the official poverty line that this option, you must fill out
			пе Аррпсано	in to have the Ghapter i i illi	ng r ee vve	wed (Official For	ii 103b) and life it with	ryour petition.
9.	Have you filed for bankruptcy within the last 8 years?	□ No ■ Yes						
	last o years:	— 16	5.	Northern District of				10-08875 -Dismissed
			District	Illinois	When	3/03/10	Case number	Ch 13
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	s.					
			Debtor				Relationship to	/ou
			District		When		Case number, if	known
			Debtor				Relationship to y	/ou
			District		When		Case number, if	known
11.	Do you rent your	□ No	. Go to li	ne 12.				
	residence?	■ Ye	s. Has yo	ur landlord obtained an evict	tion judgm	ent against you a	nd do you want to stay	in your residence?
				No. Go to line 12.				

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Debtor 1 Sharon Denise Veazley

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Case number (if known)

art	Report About Any Bu	sinesses `	You Own	as a Sole Proprietor	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of business	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State & ZIP Code	
	it to this petition.		Check	k the appropriate box to describe your business:	
				Health Care Business (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as defined in 11 U.S.C. § 101(53A))	
				Commodity Broker (as defined in 11 U.S.C. § 101(6))	
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate eles. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ons, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure .S.C. 1116(1)(B).		
	For a definition of small	■ No.	I am n	not filing under Chapter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	iling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am fi	iling under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
art	4: Report if You Own or	Have Any	Hazardo	ous Property or Any Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and	■ No.	What is t	the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property? Number, Street, City, State & Zip Code	
				Humber, Otreet, Oity, State & Zip Gode	

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Debtor 1 Sharon Denise Veazley

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Desc Main Document Page 6 of 12 Case number (if known) **Sharon Denise Veazley** Debtor 1 Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **□** \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **□** \$100.001 - \$500.000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Sharon Denise Veazley Signature of Debtor 2 **Sharon Denise Veazley**

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on June 25, 2016

MM / DD / YYYY

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Debtor 1 Sharon Denise Veazley

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Alfredo	J Garcia ARDC	Date	June 25, 2016
Signature of	Attorney for Debtor		MM / DD / YYYY
Alfredo J	Garcia ARDC		
Printed name			
Ledford, V	Vu & Borges, LLC		
Firm name	-		
105 W. Ma	dison		
23rd Floor	•		
Chicago, I	L 60602		
	City, State & ZIP Code		
Contact phone	312-853-0200	Email address	notice@billbusters.com
#6282408			
Bar number & S	tate		

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	e Sharon Denise Veazley		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENS	SATION OF ATTO	RNEY FOR DE	BTOR(S)
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	0.00
	Prior to the filing of this statement I have received		s	0.00
	Balance Due			0.00
2.	\$335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compen	nsation with any other person	n unless they are memb	pers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name			
6.	In return for the above-disclosed fee, I have agreed to rend	der legal service for all aspec	ets of the bankruptcy c	ase, including:
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statened c. Representation of the debtor at the meeting of creditors d. [Other provisions as needed] Notwithstanding the preceding paragraph petition only 	nent of affairs and plan whice s and confirmation hearing, a	th may be required; and any adjourned hear	rings thereof;
7.	By agreement with the debtor(s), the above-disclosed fee d	does not include the following	g service:	
		CERTIFICATION		
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.		or payment to me for re	epresentation of the debtor(s) in
١,	June 25, 2016	/s/ Alfredo J Gar	cia ARDC	
_	Date		ARDC #6282408	
		Signature of Attorn Ledford, Wu & E	•	
		105 W. Madison		
		23rd Floor Chicago, IL 6060	12	
		312-853-0200 F	ax: 312-873-4693	
		notice@billbuste	ers.com	
1		мате от taw 11 rm		

LEDFORD, WU & LE	1 Filed 06/27/16	Entered 06/27/16 15:	45: 25 R OLDIG SE (VISE 17)
105 W. Madison, 23rd Floor, Chicago, IL 60602	ATTORNEY RETE	ERPRONP CONTRACT	45: ESR OPPESE (VISUA) Client No. 67898
(312)853-0200 Fax: (312)873-4693			Responsible attorney:

1. Parties. In this contract, "Client" means the undersigned, both individually and jointly; "Attorney" means the law firm of Ledford & Wu and its staff attorneys. This contract shall supersede any prior contracts and agreements between the parties to the extent of any inconsistency.

and its start attorneys. This contract shall supersede any prior contracts and agreements between the parties to the extent of any inconsistency.
2. Services and Fees: Client retains Attorney for the following services: Chapter 7 (prepetition service only): \$\sum_C \cdot
 3. Scope of Representation: (a) Attorney will counsel and represent Client in all aspects of the above matter(s) EXCEPT: (1) adversary proceedings; (2) § 722 redemption; (3) judicial lien avoidance; (4) post-discharge litigation; (5) appeals; (6) other: (b) Attorney may agree, but is not obligated, to represent Client in the above excluded matters for an additional fee, to be agreed upon separately by the parties.
Initial Consultation. Client acknowledges that Attorney has explained the following (please initial): The options of Chapter 7 and Chapter 13 and that Client has made the choice identified in Paragraph 2 The concepts of exemption, discharge and dischargeability, and pre-filing and post-filing procedures The difference among various types of retainer and that Client has made the choice identified in Paragraph 4 TIME IS OF THE ESSENCE. Any delay on Client's part may disqualify Client for the type of relief elected or otherwise adversely affect Client's case. Attorney may not be able to file the case, or take other necessary actions, until all requested documents and/or information, including but not limited to a certificate of credit counseling, are received by Attorney Other (specify): Client understands that the advice given during the initial consultation is preliminary and based on the information available at the time, and
may change as the case is further analyzed, more facts discovered, or Client's circumstances or the law changed. 5. Client's Duties. Client agrees, during the course of representation, to: (a) provide Attorney with full, accurate and timely information, financial and otherwise; (b) follow Attorney's procedures and cooperate with Attorney in providing requested documents; (c) promptly inform Attorney of any change of address, phone number, e-mail address or employment, or activation of military duty; (d) inform Attorney before buying, selling, refinancing or transferring any real property in which Client has any interest, and before incurring any new debt, including but not limited to applying for an auto loan, personal loan, payday loan or title loan, applying for a credit card or line of credit, or using an existing credit card or line of credit; and (e) promptly inform Attorney if Client becomes entitled to an inheritance, an asset as a result of a property settlement agreement with Client's spouse or a divorce decree, life insurance proceeds, or a monetary judgment, award or settlement.
6. Co-counsel . Client understands that more than one attorney may work on this case. Where necessary, Client agrees to employ one or more of the following outside counsel, at Attorney's expense, to work on this case: Kathleen W. Vaught, Kelly M. Johnson, Wayne J. Skelton Christina Banyon, David Hall Carter, and
7. Termination . Client may discharge Attorney at any time, subject to payment of any fee owed for the services already rendered. Attorney may terminate the representation as permitted by the Illinois Rules of Professional Conduct and Local Bankruptcy Rules. Any flat fee for a bankruptcy case is advance payment for future services, becomes Attorney's property upon receipt, and is nonrefundable upon filing of the petition. In the event the representation is terminated by either party before filing and Client has paid Attorney more than \$300, Attorney will provide Client with a detailed itemization of the services rendered in support of any fee charged at the rate set forth in Paragraph 4, Client will reimburse Attorney for any expenses, including those that otherwise would be free of charge, and Client authorizes Attorney to apply the filing fee and any payment for expenses that have not been incurred towards the attorney's fee, subject to the requirements set forth herein.
X Date: 5 / 2/ // Attorney signature:

Citizens Bank PO Box 519 Sauk Rapids, MN 56379

ComEd 3 Lincoln Center Attn: Bkcy Group-Claims Department Oakbrook Terrace, IL 60181

Consultants in Lab Medicine PO Box 5981 Carol Stream, IL 60197

Dept Of Ed/Nelnet Attn: Claims Po Box 82505 Lincoln, NE 68501

Evergreen Anesthesia & Pain PO Box 631 Lake Forest, IL 60045

Fifth Third Bank 38 Fountain Square Cincinnati, OH 45263

Fingerhut POB 1140 Saint Cloud, MN 56396-1140

First Premier Bank 601 S Minneaplois Ave Dious FDalls, SD 57104

Illinois Lending Corp 724 W Washington Blvd #1 Chicago, IL 60661-2106

Illinois Title Loans 100 W. Madison Ave. Maywood, IL 60153

LCMH Affiliated Svc 2800 W. 87th St Chicago, IL 60652

Little Company of Mary 2800 W. 95th Street Evergreen Park, IL 60805

LVNV Funding Po Box 10497 Greenville, SC 29603

LVNV Funding PO Box 10585 Greenville, SC 29603

Max Lend PO Box 639 Parshall, ND 58770

Med Business Bureau 1460 Renaissance Dr Suite 400 Park Ridge, IL 60068

NCC Natiowide 815 Commerce Dr. Suite 270 Oak Brook, IL 60523

Overlnd Bond 4701 W. Fullerton Ave. Chicago, IL 60639

Premier Bank PO Box 2208 Vacaville, CA 95696

Robert & Weddle, LLC 309 W. Washington St. Suite 500 Chicago, IL 60606

Rush Oak Park Hospital 26099 Network Place Chicago, IL 60673

Stellar Recovery Inc 1327 Hwy 2 W Suite 100 Kalispell, MT 59901

TCF Bank 800 Burr Ridge Parkway Burr Ridge, IL 60521

Washington Mutual PO Box 99604 Arlington, TX 76096

Zingo Cash 200 N. Fairway Dr. Suite 180 Vernon Hills, IL 60061